Fees pursuant to the College of the propriations Act, 2005 (H.R. 4818).		R)	Complete if Known						
			Application Number 10/827,559						
FEE TRANSMITTAL			ling Date	04/19/2004					
for FY 2007		Fir	rst Named Inventor	Yoshiki Katoh, et al.					
☐ Applicant claims small entity status. See 37 CFR 1.27			Examiner Name John K. Ford						
			Art Unit 3744						
TOTAL AMOUNT OF PAYMENT			Attorney Docket No. 4041J-000859						
METHOD OF PAYMENT (check all that apply)									
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):									
Deposit Account Deposit Account Number: 08-0750 Deposit Account Name: Harness, Dickey & Pierce, P.L.C.									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
	•	7 10 1101	· —	,	• • •	t for the filing fee			
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s)									
Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION									
1. BASIC FILING, SEARCH,	AND EXAMINATION FE	ES							
	NG FEES		CH FEES	EXAMIN	ATION FEES				
Ameliantian Tana	Small Entity	F /A	Small Entit		Small Entity	5 D-11(A)			
Application Type Fee		Fee(\$)		<u>Fee(\$)</u>	<u>Fee(\$)</u>	Fees Paid (\$)			
Utility 300	150	500	250	200	100				
Design 200	100	100	50	130	65				
Plant 200	100	300	150	160	80				
Reissue 300	150 100	500	250	600	300				
Provisional 200	100	0	0	0	0				
2. EXCESS CLAIM FEES Fee Description Fee (\$)						Small Entity			
Fee Description						<u>Fee (\$)</u> 25			
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)						100			
Multiple dependent claims				200 360	180				
Total Claims Ext	ra Claims Fee(\$)		Fee Paid (\$)		<u>Multiple</u>	Dependent Claims			
<u>24</u> -38 or HP= <u>0</u>	x <u>50</u> =	=	<u>0</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
HP = highest number of total clair	ms paid for, if greater than 20.								
Indep. Claims Ext	ra Claims Fee(\$)		Fee Paid (\$)						
<u>1</u> -3 or HP= <u>0</u>	x <u>200</u>	=	<u>0</u>						
HP = highest number of independ	dent claims paid for, if greater th	an 3.							
3. APPLICATION SIZE FEE									
If the specification and drawing						150			
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)						Fee Paid (\$)			
100 = <u>0</u> / 5	= <u>0</u>								
4. OTHER FEE(S)	Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge) : One Month Extension of Time						<u>120</u>			
	-								

SUBMITTED BY				
Signature	MIL	Registration No. (Attorney/Agent) 34,007	Telephone	(248) 641-1600
Name (Print/Type)	Michael J. Schmidt		Date	September 26, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.